## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

| Application or Docket Number |
|------------------------------|
| 10001245                     |

|  | CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN   |   |              |                                      |                  |                  |      |                    |                        |      |                     |                        |
|--|--|---|--------------|--------------------------------------|------------------|------------------|------|--------------------|------------------------|------|---------------------|------------------------|
| (Column 1) (Column 2)  |  |   |              |                                      |                  |                  |      | TYPE               |                        |      | OR SMALL ENTITY     |                        |
| TOTAL CLAIMS   |  |   | 28           |                                      |                  |                  |      | RATE               | FEE                    | ]    | RATE                | FEE                    |
| FOR ·  |  |   | NUMBER FILED |                                      | NUMBER EXTRA     |                  |      | BASIC FEI          | 385.00                 | OR   | BASIC FEE           | 770.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | minus 20=    |                                      | . 8              |                  |      | XS 9=              | 72                     | OR   | X\$18=              | •                      |
| ⊢  | DEPENDENT C  |   | minus 3 =    |                                      |                  | 2                |      | X43=               |                        | OR   | X86=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |              |                                      |                  |                  |      | +145=              |                        | OR   | +290=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in O/J21107   |  |   |              |                                      | "0" in 0         | column 2         |      | TOTAL              | 457                    | OR   | TOTAL               |                        |
| Ol/21/07 Column 1) (Column 2) (Column 3)   |  |   |              |                                      |                  |                  |      | SMALL              | ENTITY                 | OR   | OTHER<br>SMALL      |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHE<br>NUMB<br>PREVIO<br>PAID F    | ER<br>USLY       | PRESENT<br>EXTRA |      | RATE               | ADDI-<br>TIONAL<br>FEE |      | RATE                | ADDI-<br>TIONAL<br>FEE |
| NOS  | Total  | .28                                       | Minus        | 28                                   |                  | #                |      | X\$ 9=             |                        | OR   | X\$18=              |                        |
| AME  | Independent  | NTATION OF MI                             | Minus        | ENDENT                               | CI AIRA          | -                |      | X43=               |                        | OR   | X86=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |   |              |                                      |                  |                  |      | +145=              |                        | OR   | +290=               |                        |
|  |  |   |              |                                      |                  |                  |      | TOTAL<br>DDIT. FEE |                        | OR   | TOTAL<br>ADDIT, FEE |                        |
| . (Column 1) (Column 2) (Column 3)   |  |   |              |                                      |                  |                  |      |                    |                        |      |                     |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHE<br>NUMB<br>PREVIOI<br>PAID F   | ER<br>USLY       | PRESENT<br>EXTRA |      | RATE               | ADDI-<br>TIONAL<br>FEE |      | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus        | **                                   | •                |                  | •    | X\$ 9=             | 4                      | OR   | X\$18=              |                        |
|  | Independent  | * NTATION OF MU                           | Minus        | CAIDEAIT A                           | 21. 4144         | •                |      | X43=               |                        | OR   | X86=                |                        |
|  | · ·  | INTATION OF MO                            | CHIPLE DEP   | ENDENT                               | CLAIM            |                  |      | +145=              |                        | OR   | +290=               |                        |
|  |  |   |              |                                      |                  |                  |      | TOTAL<br>ODIT, FEE |                        | OR   | TOTAL<br>ADDIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |              |                                      |                  |                  |      |                    |                        |      |                     |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHE<br>NUMBE<br>PREVIOL<br>PAID FO | st<br>Er<br>Isly | PRESENT EXTRA    |      | RATE               | ADDI-<br>TIONAL<br>FEE |      | RATE                | ADDI-<br>TIONAL<br>FEE |
| ַבַּן<br>בַּ   | Total  | •   | Minus        | **                                   |                  | <b>-</b> .       |      | X\$ 9=             |                        | OR   | X\$18=              |                        |
| E E  | independent  | •   | Minus        | ***                                  |                  | <b>.</b>         | ┢    |                    |                        |      |                     |                        |
| <u>م [</u>   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |              |                                      |                  | ·  _             | X43= |                    | OR                     | X86= |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the "Highest Number Provinces Park For IN TAIL SPACE is less than the entry in column 3. |  |   |              |                                      |                  |                  |      |                    |                        |      |                     |                        |
| !i   | "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE OR ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                                      |                  |                  |      |                    |                        |      |                     |                        |